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PTO/SB/21 (6-98)

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number <b>10/050,426</b>
		Filing Date <b>January 15, 2002</b>
		First Named Inventor <b>Michael Nuttall</b>
		Group Art Unit <b>2813</b>
		Examiner Name <b>Unassigned</b>
Total Number of Pages in This Submission		Attorney Docket Number <b>MI22-1904</b>

EV077384908US

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) <i>(please identify below):</i>
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> PTO return receipt postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/> Form 1449 & cited ref.
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks      Customer No. 021567	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	The Commissioner is hereby authorized to charge any additional fees required under 37 CFR Sections 1.16 and 1.17 and credit any overpayments to: 23-0925.	

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Mark S. Matkin, Reg. No. 32,268; Wells St. John P.S.	RECEIVED MAY 13 2001 300 MAIL ROOM
Signature		
Date	5/1/01	

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: [redacted]

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Signature	Date

**Burden Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No. .... 10/050,426  
Filing Date ..... January 15, 2002  
Inventor ..... Michael Nuttall  
Assignee ..... Micron Technology, Inc.  
Group Art Unit ..... 2813  
Examiner ..... Unassigned  
Attorney's Docket No. .... MI22-1904  
Title: Methods of Forming a Capacitor

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

References -See Attached Form PTO-1449

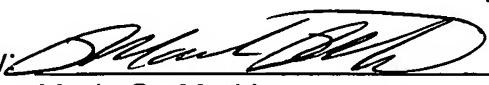
The Examiner's attention is directed to the reference which is listed on the attached Form PTO-1449, a copy of which is attached. No admission is made regarding whether the submitted reference is prior art.

Citation of the referenced art is respectfully requested.

This Supplemental Information Disclosure Statement is being filed within three months of the filing date of the application or before the mailing date of a first Office Action, whichever occurs last. Therefore, no fee is believed to be required. However, in the event that a fee is required for filing this Supplemental Information Disclosure Statement, please charge the fee specified under 37 C.F.R. § 1.17(p) to Deposit Account No. 23-0925.

Respectfully submitted,

Dated: 5-7-02

By:   
Mark S. Matkin  
Reg. No. 32,268

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